DECLARATION FOR "371" APPLICATION Page 1 of 3

COMBINED DECLAR APPLICATION WITH	ATTORNEY'S DOCK PR60251USW First Names Inventor: BOGGS							
() Declaration submitted with initial f	Complete if known: App No.:							
() Declaration submitted after initial filing (surcharge required 37CFR1.16(e))								
				Group Art Unit:				
As below named	As below named inventor. I hereby declare that:							
My residence, post office a	address and citiz	zenship are as stated belo	ow next to my name.					
			e is listed below) or an original, simed and for which a patent is so					
	1	NOVEL CHEMICAL	COMPOUNDS					
the specification of which ((check only one	e item below):						
[]is attached hereto. OR								
[x] was filed on	as Uni	ted States application Se	erial No or PCT	International				
Application Number PCT/US04/17660 filed June 07, 2004 and was amended on (MM/DD/YYYY) (if applicable)								
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.								
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56.								
I hereby claim foreign priority benefits under 35 U.S.C. §119 (a)-(d) or §365(b) of any foreign applications(s) for patent or inventor's certificate or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or of any PCT international application having a filing date before that of the application on which priority is claimed:								
PRIOR FOREIGN AND ANY PR								
Prior Foreign Application Number (s)		Country	Foreign Filing Date (MM/DD/YYYY))	PRIORI' CLAIMI				
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2. 3.								
4.								
5.			· · · · · · · · · · · · · · · · · · ·					
I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below:								
Application No.								
1. 60/477,251								
2. 60/497,823 3.		08	8/26/2003		—-			
<u>. </u>		L						

DECLARATION FOR "371" APPLICATION Page 2 of 3

COMBINED DECLARATION FOR UTILITY or DESIGN	
PATENT APPLICATION WITH POWER OF ATTORNEY	Continued

ATTORNEY'S DOCKET NUMBER PR60251USW

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

		tability as defined in 37 C.F.R. §1.56 which be ling date of this application:	came available between the filing date	of the prior application(s) and the national or		
PRIOF	U.S. PARENT	APPLICATION or PCT PARENT	APPLICATION			
				STATUS (Check one)		
U.S.	Parent Application or	PCT Parent Parent Filing (MM/DD/YY		PENDING ABANDONED		
	Number					
prosecut	e this application a	: As a named inventor, I hereby appoint to transact all business in the Patent and Customer Number 20462	he practitioners associated with the Trademark Office connected the	e Customer Numbers provided below to rewith		
				Direct Telephone Calls to:		
Address		ice and telephone calls to Customer N	umber <u>2334 /</u>	Britte Perspirate Cario to		
	David J. Levy Corporate Intellec	tual Property		Amy H. Fix		
	GlaxoSmithKline	tual 1 toperty		919-483-8911		
	Five Moore Drive,					
71 1		Park, NC 27709-3398	-1-1 4 het ell etc	towants made on information and haliaf		
I nereby	declare that all s	nd further that these statements were n	wiedge are true and that an sta	tements made on information and belief		
made or	eved to be true; at	ine or imprisonment, or both, under 18	RIIS C 1001 and that such w	illful false statements may jeonardize		
		ition or any patent issuing thereon.	O.S.C. 1001, and that such w	mur raise statements may jeoparatze		
uic vaii						
_	FULL NAME	FAMILY NAME BOGGS	FIRST GIVEN NAME Sharon	SECOND GIVEN NAME/INITIAL Davis		
2	OF INVENTOR INVENTOR'S	Signature		Date:		
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2	OF INVENTOR	GUDMUNDSSON /	Kristjan	S Date:		
	INVENTOR'S SIGNATURE	7mx-06	71.	26 Aug 04		
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	CITIZENSHIP	Durham /	NC	IS U		
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2	OF INVENTOR	RICHARDSON	Leah	D'Aurora		
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3	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US		
		Five Moore Drive, PO Box 13398	<u> </u>			

DECLARATION FOR "371" APPLICATION Page 2 of 3

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

ATTORNEY'S DOCKET NUMBER

PR60251USw

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	re i international fi	ing date of this applicati	ion.					
PRIOF	R U.S. PARENT	APPLICATION or	PCT PARENT A	PPLICATIO	V			
						STATUS (Check one)		
U.S.	Parent Application or Number	PCT Parent	Parent Filing I (MM/DD/YY)		PATENTED	PENDING	ABANDONED	
prosecut	e this application ar	: As a named inventor and to transact all busing Customer Number 2	ess in the Patent and				provided below to	
Address	s all corresponden	ce and telephone ca	lls to Customer N	umber 23347		Direct Telephone Ca	alls to:	
David J. Levy Corporate Intellectual Property GlaxoSmithKline				Amy H. Fix 919-483-8911				
	Five Moore Drive,	PO Box 13398 Park, NC 27709-3398						
are beli made ar	y declare that all s eved to be true; ar re punishable by fi		statements were m, or both, under 18	ade with the kr	owledge that will	lful false statemen		
	FULL NAME	FAMILY NAME		FIRST GIVEN NAM	IE	SECOND GIVEN NAME	/INITIAL	
2	OF INVENTOR	BOGGS		Sharon		Davis		
	INVENTOR'S	Signature				Date:		

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2	OF INVENTOR	BOGGS	Sharon	Davis
1	INVENTOR'S	Signature		Date:
İ	SIGNATURE			
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Į.	CITIZENSHIP	Durham	l NC	US
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1	INVENTOR'S	Signature		Date:
	SIGNATURE			
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1	CITIZENSHIP	Durham	NC	IS
	POST OFFICE	POST OFFICE ADDRESS	СПУ	STATE & ZIP CODE/COUNTRY
2	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	RICHARDSON	Leah	D'Aurora
1	INVENTOR'S	Signatur SO		Date: 68/m. bul
	SIGNATURE	Signature		³⁸ /01/04
0	RESIDENCE &		STATE OR FOREIGN COUNTRY	COUNTRY OF CHIZENSHIP
	CITIZENSHIP	Durham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	СПУ	STATE & ZIP CODE/COUNTRY
3	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
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DECLARATION FOR "371" APPLICATION Page 3 of 3

2	FULL NAME OF INVENTOR	FAMILY NAME SEBAHAR	FIRST GIVEN NAME Paul	SECOND GIVEN NAME/INITIAL Richard
	INVENTOR'S SIGNATURE	Signature L. L. L.		Date: 08/26/04
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